

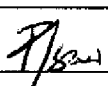
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|---|----------|------------------------|----------------|
| <h1 style="text-align: center;">TRANSMITTAL<br/>FORM</h1> <p style="text-align: center;">(to be used for all correspondence after initial filing)</p> |          | Application Number     | 10/511,937     |
|   |          | Filing Date            | April 24, 2003 |
|   |          | First Named Inventor   | Jay WOHLGEMUTH |
|   |          | Art Unit               | 1634           |
|   |          | Examiner Name          | J. Martinell   |
| Total Number of Pages in This Submission  | 3+6 Refs | Attorney Docket Number | 506612000104   |

## ENCLOSURES (Check all that apply)

|  |   |  |
|--|---|--|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input checked="" type="checkbox"/> Information Disclosure Statement (3 pages)<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Reply to Missing Parts/Incomplete Application<br><input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>1. PTO/SB/08A/B - (1 page)<br>2. Copy of 6 cited references |
| <div style="border: 1px solid black; padding: 5px; min-height: 40px;">         Remarks       </div>  |   |  |

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|              |   |          |        |
|--------------|---|----------|--------|
| Firm Name    | MORRISON & FOERSTER LLP (Customer No. 20872)  |          |        |
| Signature    |  |          |        |
| Printed name | Patricia Tsao   |          |        |
| Date         | September 23, 2008  | Reg. No. | 50,713 |